

# Creative Sports Coaching CIC

## Supporting Pupils with Medical Conditions Policy

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### Aims

This policy aims to ensure that:

- Participants, staff and parents understand how our company will support participants with medical conditions.
- Participants with medical conditions are properly supported to allow them to access the same activities as other pupils, including school trips and sporting activities.

The board of directors will implement this policy by:

- Making sure sufficient staff are suitably trained.
- Making staff aware of participant's condition, where appropriate.
- Making sure there are cover arrangements to ensure someone is always available to support participants with medical conditions.

**The named person with responsibility for implementing this policy is the Designated Safeguarding Lead (DSL).**

### Legislation and statutory requirements

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing bodies to make arrangements for supporting participants with medical conditions.

It is also based on the Department for Education's statutory guidance [Supporting pupils at school with medical conditions](#).

### Roles and responsibilities

The board of directors has ultimate responsibility to make arrangements to support participants with medical conditions. The directors will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting pupils with medical conditions.

The DSL will:

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

Supporting participants with medical conditions during company activities is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Staff will take into account the needs of pupils with medical conditions that they instruct. All staff will know what to do and respond accordingly when they become aware that a participant with a medical condition needs help.

Parents will:

- Provide the company with sufficient and up-to-date information about their child's medical needs.
- Carry out any action as part of the implementation of the IHP e.g. provide medicines and equipment.

Participants with medical conditions will often be best placed to provide information about how their condition affects them. Participants should be fully involved in discussions about their medical support needs and contribute as much as possible to comply with their IHPs.

### **Equal opportunities**

Our company is clear about the need to actively support participants with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The company will consider what reasonable adjustments need to be made to enable these participants to participate fully and safely on trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that participants with medical conditions are included. In doing so, participants, their parents and any relevant healthcare professionals will be consulted.

### **Individual Health Plans (IHP)**

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a participant has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. When deciding what information to record on IHPs, consideration to the following is taken into account:

- The medical condition, its triggers, signs, symptoms and treatments.
- The participant's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors.
- Specific support for the participant's educational, social and emotional needs e.g. how absences will be managed, requirements for extra time to complete tests.
- The level of support needed, including in emergencies.
- Who will provide this support, their training needs, expectations of their role, confirmation of proficiency to provide support for the participant's medical condition from a healthcare professional and cover arrangements for when they are unavailable.
- Who in the company needs to be aware of the participant's condition and the support required.
- Arrangements for written permission from parents for medication to be administered by a member of staff during activities.
- Separate arrangements or procedures required for trips or other activities outside of the normal day that will ensure the participant can participate e.g. risk assessments.
- Where confidentiality issues are raised by the parent, the names of the designated individuals to be entrusted with information about the pupil's condition.
- What to do in an emergency, including who to contact, and contingency arrangements.

### **Managing medicines**

Prescription and non-prescription medicines will only be administered:

- When it would be detrimental to the participant's health or attendance not to do so; and
- Where we have parents' written consent.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a participant any medication will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The company will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The company will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Participants will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to participants and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **Controlled drugs**

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

Controlled drugs will be kept in a secure and only named staff will have access. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

### **Participant managing their own needs**

Participants who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Participants will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure outlined in the IHP and inform parents so that an alternative option can be considered, if necessary.

### **Unacceptable practice**

Company staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, or from administering their medication when and where necessary.
- Assume that every participant with the same condition requires the same treatment.
- Ignore the views of the participant or their parents.
- Ignore medical evidence or opinion.
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP.
- Penalise participants for their attendance record if their absences are related to their medical condition e.g. hospital appointments or injury.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend to administer medication or provide medical support to their child, including with toileting issues.

- Prevent pupils from participating in or create unnecessary barriers to pupils participating in any aspect of company activities, including school trips e.g. by requiring parents to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets.

### **Emergency procedures**

Staff will follow the company's normal emergency procedures (for example, calling 999). All participants' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a participant needs to be taken to hospital, staff will stay with the pupil until the parent arrives or accompany the participant to hospital by ambulance.

### **Training**

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to participants with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the DSL. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the participants.
- Fulfil the requirements in the IHPs.
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

### **Record keeping**

The board of directors will ensure that written records are kept of all medication administered to pupils. Parents will be informed if their child has been unwell at an activity. IHPs are kept in a readily accessible place which all staff are aware of.

### **Liability and indemnity**

The directors will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

### **Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the DSL in the first instance. If the DSL cannot resolve the matter, they will direct parents to the school's complaints procedure.

**Monitoring arrangements**

This policy will be reviewed annually by the DSL. At each review, the policy will be approved by the directors.

**Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

**Approved by: James Hatch, Director**

*James Hatch*

Signed.....

**Last reviewed:** August 2024

**Next review:** August 2025